## PATENT APPLICATION FEE DETERMINATION RECORD Effective December 8, 2004

Application or Docket Number 10/537979

ᆫ					25 9	0 4	3000	0				
CLAIMS AS FILED - PART I								SMALL ENTITY TYPE		OTHER THAN OR SMALL ENTITY		
		·····	(Column	1)	(Column 2)			TTPE		UK I	SMALL	MILLA
U.S	. NATIONAL S	STAGE FEES		٠				RATE	FEE		RATE	FEE
BAS	IC FEE		SMALL ENT.		LARG	E ENT. = \$ 300		BASIC FEE		OR	BASIC FEE	300
EXAMINATION FEE			Satisfies PCT A (4) = \$50	/\$ 100		her situations = 100 / \$ 200		EXAM FEE			EXAM FEE	200
SEARCH FEE			U.S. is ISA = \$ ALL other cou \$ 200 / \$	ntries =		her situations = - 250 / \$ 500		SEARCH FEE			SEARCH FEE	4w
FEE FOR EXTRA SPEC. PGS.			min	ıs 100 =		/50=		X \$ 125 =			X \$ 250 =	·
TOT	AL-CHARGEAE	BLE CLAIMS	g minus 20 = .					X \$ 25 =		OR	X \$ 50 =	
INDE	PENDENT CL	AIMS	/ minus 3 = .					X \$ 100 =		OR	X \$ 200 =	Ì.
MUL	TIPLE DEPENI	DENT CLAIM PRI	ESENT		_			+ \$ 180 =		OR	+ \$ 360 =	
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL		OR	TOTAL	900
1	u Andt					OTHER '	TUAN					
(Column 1) (Column 2) (Column 3)								SMALL ENTITY		OR	SMALL ENTITY	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER XUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 9	Minus	Zé	)	= /		X \$ 25 =		OR	X \$ 50 =/	
	Independent	• (	Minus	"(3		= (		X \$ 100 =		OR	X \$ 200 =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						-	+\$ 180 =		OR	+ \$ 360 =	
								TOTAL ADDIT. FÉE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Caba	2\	(Caluma 2)						
	·	(Column 1)		(Colun		(Column 3)	ı			1		
AMENDMENT B		REMAINING AFTER AMENDMENT		NUMB PREVIO PAID	BER XUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		a ·		X \$ 25 =		OR	X \$ 50 =	·
	Independent	•	Minus	***		=		X \$ 100 =		OR	X \$ 200 =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+ \$ 180 =		OR	+ \$ 360 =	
										OR	TOTAL ADOIT.	
FEE ST. FEE												
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS, SPACE is less than "20", enter "20".  *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than "3", enter "3".												
	The "Highest Num	nher Previously Paid	For Cotal or last	i Mochoone	s the blot	host aumhor found	in th	e appropriate hor	r in column 1			